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Fill in this information to identify your case	e;
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

APR 12 2016

JEFFREY P. ALLSTEAD + if this is an amended HABK

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your **ELSA** government-issued picture First name First name identification (for example, your driver's license or passport). Middle name Middle name REZA Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name First name years Middle name Middle name Include your married or maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - 2 3 5 8your Social Security number or federal OR Individual Taxpayer 9 xx - xx -\_\_\_\_\_\_ 9 xx - xx -\_\_\_\_\_ Identification number (ITIN)

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	Debtor 1 ELSA First Name Middle 1	REZA Name Last Name	Case number (if known)
	THE PRINCE	verifie Lass (Verifie	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4	Any business names and Employer Identification Numbers (EIN) you have used in	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names		
	J	Business name	Business name
		EIN	EIN
		EIN	EIN — - — — — — —
5.	Where you live		If Debtor 2 lives at a different address:
		137 N EAST AVE.	
		Number Street	Number Street
		***************************************	
		AURORA         IL         60505           City         State         ZIP Code	City State ZIP Code
		KANE	State 21 Gode
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			30
		1994 Andrew Andr	1 3 W 1 M M M M M M M M M M M M M M M M M M M

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Debtor 1	ELSA First Name Middle Na	ime	REZA Last Name	-	Case number (#	known)
Part 2:	Tell the Court Abo	ut Your I	Bankruptcy Case	•		
	chapter of the	Check of	one. (For a brief des	cription of each, see <i>No</i> ). Also, go to the top of	otice Required by 11	1 U.S.C. § 342(b) for Individuals Filing
are cho	choosing to file	☐ Cha		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	page t and encont.	TO SEPTIME DOM:
und	er		pter 11			
			pter 12			
			pter 13			
в. Hov	v you will pay the fee	loca you sub with  I ne App  I rec By li less pay	Il court for more derself, you may pay mitting your paym a pre-printed add ed to pay the fee lication for Individuals that my fee aw, a judge may, it than 150% of the fee in installm	etails about how you with cash, cashier's ent on your behalf, y lress.  in installments. If y wals to Pay The Filing be waived (You may but is not required to official poverty line to	may pay. Typical check, or money our attorney may ou choose this or general feet in Installment, waive your fee, what applies to you this option, you may be a second or second	eck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check of one of the cents of the cents (Official Form 103A).  Ition only if you are filing for Chapter 7, and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.
	kruptcy within the	☑ No	District	Who		
idst	8 years?	100.	District		MM / DD / YYYY	
			LASTICE	WILE	MM / DD / YYYY	Case number
			District	When	MM / DD / YYYY	Case number
o. Are	any bankruptcy	<b>⊿</b> No				
	s pending or being by a spouse who is liling this case with or by a business ler, or by an		Debtor			Relationship to you
not fili you, or				. Wher		Case number, if known
			Debtor			Relationship to you
			District	When	MM / DD / YYYY	Case number, if known
	ou rent your lence?	Ø No. □ Yes.	residence?	12. tial Statement About an		and do you want to stay in your  *Against You (Form 101A) and file it with

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ebtor 1	ELSA		REZA		Case nun	nber (if known)		
	First Name Middle Nam	ne	Last Name	<u> </u>	5430 Hall	- 2. (manual)		
rt 3:	Report About Any E	Busines	ses You Own as a S	ole Proprie	etor			
	,						<b>***</b>	
Are vo	u a sole proprietor	[7] No.	Go to Part 4.					
	full- or part-time	₩ INO.	Go to Part 4.					
busine		🔲 Yes.	. Name and location of b	usiness				
	roprietorship is a		•					
	s you operate as an al, and is not a		Name of business, if any	······································				
separate	e legal entity such as		,					
a corpor LLC.	ration, partnership, or		Number Street					
	ave more than one							
sole pro	prietorship, use a						**************************************	
separate to this pe	e sheet and attach it							
to this p			City		S	State ZIP Co	de	
			Check the appropriate	box to descri	be your business:			
			Health Care Busine	ss (as define	d in 11 U.S.C. § 10	1(27A))		
			☐ Single Asset Real 8	istate (as def	fined in 11 U.S.C. §	101(51B))		
			☐ Stockbroker (as det	fined in 11 U.	S.C. § 101(53A))			
			☐ Commodity Broker			11		
			None of the above	(45 4511154 11	(11 0.0.0. 3 10 1(0)	"		
			- None of the above	***************************************				
are you debtor	-	any of th	cent balance sheet, state nese documents do not de Lam not filing under Ch	exist, follow th				
	finition of <i>small</i> s <i>debtor</i> , see	****	-		- NOTII busin		d)	*-
	C. § 101(51D).		I am filing under Chapte the Bankruptcy Code.	ar ee, butear	II NOT a Small busin	iess debior accord	ang to the definition	on in
		☐ Yes.	I am filing under Chapte	er 11 and Iar	n a small business d	tehtor according to	o the definition in t	the
			Bankruptcy Code.		ii a siiiali basiiises a	robiol docording to	7 4 10 40 11 11 11	
rt 4: 1	Report if You Own o	r Have	Any Hazardous Proj	perty or An	y Property That	Needs Immedi	ate Attention	
					,		<del>(</del>	
Do you	own or have any	Z No						
propert	y that poses or is	Yes.	\A(L4 :_ 4L 1					
	to pose a threat inent and	Tes.	What is the hazard?		***************************************			
	able hazard to							
public t	nealth or safety?					***************************************		····
Or do y	ou own any							
propert immedi	y that needs ate attention?		If immediate attention	is needed, w	hy is it needed?	······································		
	nple, do you own							
perishabi that must	le goods, or livestock t be fed, or a building ds urgent repairs?			***************************************				
			Where is the property?	<b>)</b>				
			r - r - / y -	Number	Street			
						<del></del>		
					***************************************			
				City		Sta	ate ZIP Code	

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Debtor 1 ELSA First Name Middle	REZA Name Last Name	Case number (if known)	<del></del>
Part 5: Explain Your Effo	orts to Receive a Briefing About Cro	adit Counseling	
15. Tell the court whether you have received a	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)	<b>)</b> :
briefing about credit counseling.	You must check one:	You must check one:	
The law requires that you receive a briefing about credi		0 days before I counseling agency within the 180 days be	efore I
counseling before you file for bankruptcy. You must truthfully check one of the	Attach a copy of the certificate and plan, if any, that you developed wit		
following choices. If you cannot do so, you are not eligible to file.	I received a briefing from an app counseling agency within the 18 filed this bankruptcy petition, bu certificate of completion.	0 days before I counseling agency within the 180 days be	efore !
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors	Within 14 days after you file this ba you MUST file a copy of the certific plan, if any.		petition ayment
can begin collection activities again.	I certify that I asked for credit co services from an approved agen- unable to obtain those services of days after I made my request, an circumstances merit a 30-day ter- of the requirement.	cy, but was services from an approved agency, but was during the 7 unable to obtain those services during the days after I made my request, and exigent	e 7 t
	To ask for a 30-day temporary waiv requirement, attach a separate she what efforts you made to obtain the you were unable to obtain it before bankruptcy, and what exigent circurequired you to file this case.	et explaining requirement, attach a separate sheet explaini briefing, why what efforts you made to obtain the briefing, v you filed for you were unable to obtain it before you filed for	why for
	Your case may be dismissed if the dissatisfied with your reasons for no briefing before you filed for bankrup	ot receiving a dissatisfied with your reasons for not receiving	g a
	If the court is satisfied with your rea still receive a briefing within 30 day: You must file a certificate from the agency, along with a copy of the pa developed, if any. If you do not do s may be dismissed.	s after you file.  approved  You must file a certificate from the approved  yment plan you  still receive a briefing within 30 days after you  approved  you must file a certificate from the approved  agency, along with a copy of the payment pla	ı file. ın you
	Any extension of the 30-day deadling only for cause and is limited to a maddays.		
	☐ I am not required to receive a brid credit counseling because of:	efing about	ut
	incapacity. I have a mental ill deficiency that ma		mental

incapable of realizing or making

rational decisions about finances.

My physical disability causes me

to be unable to participate in a

briefing in person, by phone, or

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

through the internet, even after I

Disability.

incapable of realizing or making rational decisions about finances.

My physical disability causes me

to be unable to participate in a

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Disability.

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De	ELSA First Name Middle Ner	REZA me Last Name	Case number (# km	омп)		
	LEST INSUITE MODIFIES	ne Last Name				
P	art 6: Answer These Que	stions for Reporting Purpos	ses			
16	. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	you have.	No. Go to line 16b.  Yes. Go to line 17.				
			rily business debts? Business debts vestment or through the operation of the			
		No. Go to line 16c. Yes. Go to line 17.				
		16c. State the type of debts you	owe that are not consumer debts or bus	siness debts.		
				emertary minut the discourse recovers		
17.	Are you filing under Chapter 7?	☑ No. I am not filing under Ch	napter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be	administrative expense	er 7. Do you estimate that after any exen s are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?		
	available for distribution to unsecured creditors?					
18.	How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19.	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 ☑ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion		
Pa	rt 7: Sign Below	www.docolog.e.h.t.	<b>3</b> 100,000,001-\$300 Hillinon	Ca More than \$50 binon		
Fo	r you	I have examined this petition, an correct.	d I declare under penalty of perjury that	the information provided is true and		
		If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed, is understand the relief available under each	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed		
			I I did not pay or agree to pay someone vind read the notice required by 11 U.S.C			
		I request relief in accordance with	h the chapter of title 11, United States Co	ode, specified in this petition.		
		I understand making a false state with a bankruptcy case can resul 18 U.S.C. §§ 152, 1341, 1519, at	It in fines up to \$250,000, or imprisonme	money or property by fraud in connection nt for up to 20 years, or both.		
		Signature of Debtor 1	ole Kya X	of Debtor 2		
			V			
		Executed on 04/11/2016	Executed	on		

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Debtor 1 ELSA First Name Middle Name	REZA Last Name	Case number (if known)	
represented by one	I, the attorney for the debtor(s) named in this petition, d to proceed under Chapter 7, 11, 12, or 13 of title 11, Ur available under each chapter for which the person is el the notice required by 11 U.S.C. § 342(b) and, in a casknowledge after an inquiry that the information in the so	nited States Code, an igible. I also certify th e in which § 707(b)(4 chedules filed with the	d have explained the relief nat I have delivered to the debtor(s) )(D) applies, certify that I have no
· · · · · · · · · · · · · · · · · · ·		Date	
	Signature of Attorney for Debtor		MM / DD /YYYY
•			
·	Printed name		
	Firm name		
	Number Street		****
	City	State	ZIP Code
	Oily .	State	Zir Coue
•	Contact share	<b>5</b>	
	Contact phone	Email address	
	Bar number	State	
		releval - down bashesses resurresses with carpe and	

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Debtor 1	ELSA First Name Middle Name	REZA	Case number (if known)				
bankrupte attorney	f you are filing this cy without an	should understand t themselves success	an individual, to represent yourself in bankruptcy court, but you nat many people find it extremely difficult to represent ully. Because bankruptcy has long-term financial and legal re strongly urged to hire a qualified attorney.				
an attorne	represented by ey, you do not le this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
		court. Even if you plan to in your schedules. If you property or properly clait also deny you a dischart case, such as destroyint cases are randomly aud	operty and debts in the schedules that you are required to file with the opay a particular debt outside of your bankruptcy, you must list that debt do not list a debt, the debt may not be discharged. If you do not list mit as exempt, you may not be able to keep the property. The judge can ge of all your debts if you do something dishonest in your bankruptcy gor hiding property, falsifying records, or lying. Individual bankruptcy ited to determine if debtors have been accurate, truthful, and complete.				
		If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.					
		Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?  □ No					
	•	☑ Yes					
		Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?  No					
		☑ Yes					
		Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?  No  Yes. Name of Person  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
		have read and understo	wledge that I understand the risks involved in filing without an attorney. I ad this notice, and I am aware that filing a bankruptcy case without an o lose my rights or property if I do not properly handle the case.				
		Signature of Debtor 1 Date 04/11/20	Signature of Debtor 2				
		MM / DD /	YYY MM / DD /YYYY				
		•	141-6969 Contact phone				
		Cell phone	Cell phone				

### **ELSA REZA CREDITORS**

RoundPoint Mortgage Servicing Corporation PO Box 19789 Charlotte, NC 28219-9409

LOAN #1002037922

## **CODILLIS AND ASSOCIATES**

15W030 North Frontage Road Burr Ridge, IL USA 60527

CASE # 15CH00084